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**FAX TRANSMISSION**

Date: December 20, 2007  
To: Examiner A. Levine GAU 3625 U.S. Patent and Trademark Office  
Fax: 571-273-8300  
From: William J. Clemens  
Re: 1-16514

We are transmitting a total of 22 pages (including cover sheet).  
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COMMENTS: Please see the following Fee Transmittal form and Response for filing in the patent application S/N 10/649,039. Thank you.

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DEC 20 2007

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**  
**For FY 2008**☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 60.00

**Complete if Known**

Application Number	10/649,039
Filing Date	August 27, 2003
First Named Inventor	Kernz
Examiner Name	A. Levine
Art Unit	3625
Attorney Docket No.	1-16514

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 50-3156 Deposit Account Name: Fraser Clemens Martin &

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

**Total Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

\_\_\_\_\_ - 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

\_\_\_\_\_ - 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

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**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	_____	_____ / 50 = _____ (round up to a whole number) x _____	_____	_____

**4. OTHER FEE(S)**

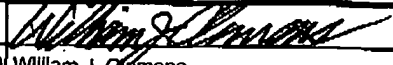
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): one (1) month extension of time

Fees Paid (\$)

60.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 26,855	Telephone 248-960-2100
Name (Print/Type)	William J. Clemens		Date December 20, 2007

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

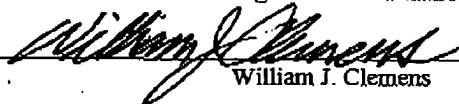
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## CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted  
to the Commissioner for Patents on:DECEMBER 20, 2007  
Date of signature and transmission

By

  
William J. Clemens

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE


In re Application of: KERNZ	)	Group Art Unit: 3625
	)	
Serial No.: 10/649,039	)	Examiner: A. Levine
	)	
Filed: August 27, 2003	)	Attorney Docket: 1-16514
	)	
For: INTEGRATED MARKET EXCHANGE	)	Confirmation No.: 5136
SYSTEM, APPARATUS, AND ...	)	

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450AMENDMENT

Honorable Sir:

Please amend the above-identified application as set forth on the following pages.

Respectfully submitted,

  
William J. Clemens, Reg. No. 26,855  
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1-16514